

Clifty Euchre Tournament October 2010





\rightarrow October 17th – 19th, 2010 \leftarrow

Getaway Package includes

♦ 2 Nights Lodging

♦ Meals & Snacks

♦ Prizes

♦ All taxes & gratuities included

Riverview Rooms \$ 327.88 per team Parkside Rooms \$ 302.66 per team Separate Rooms for team mates \$ 353.12 per team, Parkside Only

Tournament Schedule All times Eastern Standard.

| Day | 1 |
|-------------|---|
| L uv | _ |

| 4:00 pm | Check-in | No early check-ins available |
|---------|----------|------------------------------|
|---------|----------|------------------------------|

5:00 pm Dinner in the Main Dining Room

6:30 pm Session One (Rounds 1-4)

Day 2

7:00 am Breakfast in the Main Dining Room

9:00 am Session Two (Rounds 5-8)

12:00 pm Lunch in the Main Dining Room

Afternoon on own.

5:00 pm Dinner in the Main Dining Room

6:30 pm Session Three (Rounds 9-12)

Day 3

7:00 am Breakfast in the Main Dining Room

8:30 am Check out of rooms (please be checked out with the front desk before we

start playing.)

9:00 am Session Four (Rounds 13-16)

12:30 P.M. Awards Lunch

There are a limited number of seats available for the tournament. Registrations will be accepted on a first received – first reserved basis. *Registrations must be mailed!* The first 50 teams to register and pay in full will be accepted. If we are unable to accommodate your request for the tournament, you will be notified and placed on a waiting list. Confirmation notices will be sent.

Please contact Kim Gardner with any questions at 1-877-925-4389.

| Y •• | Euchr | e Registratio | n 2010 | ^ | • |
|---|---|---|---|--|----------------------|
| NAME | | | | | |
| Address | | | | | |
| City | | | | | |
| State | Zip Code | Pho | one | | |
| Parkside | two buildings. w, with a scenic vi , main building ad ccupancy room, Pa | jacent to the dini | | \$327.88 j \$302.66 j \$353.12 p | ber Team |
| Special Reque | sts: | | | | |
| | | | | | |
| effort will be ma basis. If you req please be sure to | not guarantee accoude to meet your ne duire a first floor ro note it under spec than the need for fi | eds. Rooms will loom, or need a hadial requests. Buil | be assigned ndicapped a ding prefer | on a first co accessible ro ence will be | me om, given a |
| Payment Card Number | Check | _ Credit Card | | Exp | |
| | ppears on Card _ | | | | |
| Cardholder Sigr | nature | | | | |
| MAIL CHECK | S TO: CLIFTY I | NN P.O. BOX | 387 MAI | | |
| October | $17^{\text{th}} - 19^{\text{th}}$, 2010 (| SunTues.) | | | |
| | | Partner | | | |
| | | Partner's City | | | |